

AO 440 (Rev. 06/12) Summons in a Civil Action

# UNITED STATES DISTRICT COURT

for the

Eastern District of Virginia

Gilbert P. Hyatt

*Plaintiff(s)*

v.

United States Patent and Trademark Office

Andrei Iancu

*Defendant(s)*

Civil Action No. 1:18-cv-546

## SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* Attorney General Jefferson Beauregard Sessions IV  
SERVE: ~~X~~ Assistant Attorney General for Administration Lee Lofthus  
Judicial Management Division  
U.S. Department of Justice  
950 Pennsylvania Avenue, NW, Room 1111  
Washington, DC 20530-0001

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Mark W. DeLaquil  
Baker & Hostetler LLP  
1050 Connecticut Ave NW, Suite 1100  
Washington, D.C. 20036

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT



*Kathy Lan*

Date: 5/9/18

Signature of Clerk or Deputy Clerk

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Civil Action No. 1:18-cv-546

**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* Jefferson B. Sessions, Attorney General of the United States  
was received by me on *(date)* May 9, 2018.

☐ I personally served the summons on the individual at *(place)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* \_\_\_\_\_, who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_; or

☐ I returned the summons unexecuted because \_\_\_\_\_; or

☒ Other *(specify)*: On May 9, 2018, pursuant to Federal Rule of Civil Procedure 4(i), I caused a copy of the  
summons and complaint to be sent by certified mail to (1) Defenant U.S. Patent and  
Trademark Office, (2) Defendant Andrei Iancu, (3) The U.S. Attorney General, and (4) The  
U.S. Attorney for the Eastern District of Virginia.

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: May 25, 2018



*Server's signature*

Richard B. Raile, Associate, Baker & Hostetler LLP

*Printed name and title*

1050 Connecticut Ave NW, Suite 1100  
Washington, D.C. 20036

*Server's address*

Additional information regarding attempted service, etc:

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

ASST. ATTY. GEN. FOR ADMINIST.  
 LEE LOFTHUS  
 JUDICIAL MANAGEMENT DIV.  
 U.S. DEPT. OF JUSTICE (Rm. 1111)  
 950 PENNSYLVANIA AVE. NW  
 WASHINGTON, DC 20530-0001



9590 9402 2087 6132 8308 99

## 2. Article Number (Transfer from service label)

7016 2070 0001 0383 8015

PS Form 3811, July 2015 PSN 7530-02-000-8053

**COMPLETE THIS SECTION ON DELIVERY**

## A. Signature

X

- ☐ Agent  
☒ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

MAY 14 2018

- D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☒ No

## 3. Service Type

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| <input type="checkbox"/> Certified Mail®                               | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail                                  |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

Domestic Return Receipt